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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF RHODE ISLAND	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	art 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on	James		Sheryl		
	your government-issued picture identification (for example, your driver's	First name		First name		
	license or passport).	Middle name		Middle name		
	Bring your picture	Rennick, Jr.		Rennick		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9103		xxx-xx-6713		

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Debtor 1 James Rennick, Jr.
Debtor 2 Sheryl Rennick

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs	
5.	Where you live	111 Curran Road	If Debtor 2 lives at a different address:	
		Cumberland, RI 02864 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code	
		Providence		
		County	County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code	
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	

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Deb	tor 2	Sheryl Rennick					Case number (if known)	
Part	2:	Tell the Court About \	∕our Bankrı	uptcv Ca	ase			
7.	The	chapter of the cruptcy Code you are	Check one	e. (For a l	brief description o	f each, see <i>Notice Required by</i> page 1 and check the appropria	/ 11 U.S.C. § 342(b) for Individuals Fila ate box.	ing for Bankruptcy
	choo	sing to file under	■ Chapte					
			☐ Chapte	er 11				
			☐ Chapte					
			☐ Chapte					
			•					
8.	How	you will pay the fee	abou orde	ut how your	ou may pay. Typic	cally, if you are paying the fee y	ck with the clerk's office in your local of yourself, you may pay with cash, cashi half, your attorney may pay with a cred	ier's check, or money
						Ilments. If you choose this opt (Official Form 103A).	ion, sign and attach the Application fo	r Individuals to Pay
			☐ I req	luest tha s not rec	at my fee be waiv	ved (You may request this option our fee, and may do so only if y	on only if you are filing for Chapter 7. Eour income is less than 150% of the o	official poverty line that
							in installments). If you choose this opt icial Form 103B) and file it with your p	
9.		you filed for ruptcy within the	■ No.					
		years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	Are a	ny bankruptcy s pending or being	■ No					
	filed not fi you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to	line 12.			
	resid	ence?	☐ Yes.	Has yo	our landlord obtair	ned an eviction judgment agair	st you?	
					No. Go to line 12	2.		
					Yes. Fill out <i>Initi</i> this bankruptcy		n Judgment Against You (Form 101A) a	and file it as part of

James Rennick, Jr.

Debtor 1

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James Rennick, Jr.
Shervi Rennick

Case number (if known)

Den	Sneryi Rennick			Case number (if known)				
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and location of bu	siness				
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a		Number, Street, City, Sta	ate & ZIP Code				
	separate sheet and attach it to this petition.		Check the appropriate be	ox to describe your business:				
	·		☐ Health Care Busi	iness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above	ve				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	pter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the a small business in 11 U.S.C. 1116(1)(B).		a small business debtor, you must attach your most recent balance sheet, statement of				
		■ No.	I am not filing under Cha	pter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	<i>r</i> Hazardous Property or Ar	ny Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?					
	identifiable hazard to public health or safety? Or do you own any							
	property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
	-			Number, Street, City, State & Zip Code				

Debtor 1

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Debtor 1 James Rennick, Jr.
Debtor 2 Sheryl Rennick Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:19-bk-10583 Doc 1 Filed 04/14/19 Entered 04/14/19 15:56:30 Desc Main Document Page 6 of 55

	otor 2 Sheryl Rennick	l •			Case number (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person			d in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily busi money for a business or investr						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	e that are not consu	mer debts or business	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.					
Do you estimate that after any exempt property is excluded and administrative expenses		■ Yes.	I am filing under Chapter 7. Do are paid that funds will be availa No			ty is excluded and administrative expenses			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,00 ☐ 10,001-25,0	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	\$ 100,	:50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million			☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	1 \$100,	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million			□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	t7: Sign Below								
For	you	I have ex	camined this petition, and I declar	re under penalty of	perjury that the informa	tion provided is true and correct.			
			chosen to file under Chapter 7, I tates Code. I understand the relie			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.			
			rney represents me and I did not nt, I have obtained and read the r			an attorney to help me fill out this			
		I request	relief in accordance with the cha	apter of title 11, Unit	ed States Code, specif	ied in this petition.			
		bankrupt and 3571	cy case can result in fines up to \$1.		onment for up to 20 yea	oroperty by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			es Rennick, Jr. Rennick, Jr.		/s/ Sheryl Rennick	<u> </u>			
			e of Debtor 1		Signature of Debtor 2	2			
		Executed	April 11, 2019 MM / DD / YYYY			11, 2019 DD / YYYY			

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Debtor 1	James Rennick, Jr	. Document	Page 7 of 55	
Debtor 2	Sheryl Rennick		Cas	se number (if known)
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
•	not represented by ey, you do not need page.			vledge after an inquiry that the information in the
		/s/ John S. Simonian Signature of Attorney for Debtor	Date	April 11, 2019 MM / DD / YYYY
		John S. Simonian Printed name		
		John S. Simonian Firm name		
		40 Montgomery St No 2 Pawtucket, RI 02862 Number, Street, City, State & ZIP Code		

john@law-ri.com

Email address

Contact phone **941-4800**

4694 RI Bar number & State Case 1:19-bk-10583 Doc 1 Filed 04/14/19 Entered 04/14/19 15:56:30 Desc Main

		Docume	ent Page 8 of 55	
Fill in this inform	mation to identify your	case:		
Debtor 1	James Rennick,	Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Sheryl Rennick			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	ISLAND	
Case number _ (if known)				☐ Check if this is an amended filing
				 _

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

you	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		•
Par	t 1: Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	264,800.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	78,354.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	343,154.00
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	227,091.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	102,974.00
	Your total liabilities	\$	330,065.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,494.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,863.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	James Rennick, Jr.	J
Debtor 2	Sheryl Rennick	Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,007.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	8,462.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	8,462.00

	Case	1:19-bK-10	583 DOC 1	_	ea 04/14/ cument	19 Entered 04/14 Page 10 of 55	/19 15:5	6:30 I	Jesc Main
Fill	in this inform	ation to identify	y your case and th						
Deb	otor 1	James Reni	nick, Jr.						
		First Name	Middle	Name		Last Name			
	otor 2 use, if filing)	Sheryl Renr First Name		Name		Last Name			
Unit	ted States Ban	kruptcy Court fo	r the: DISTRICT	OF RH	ODE ISLAND				
		. ,							
Cas	se number					_			☐ Check if this is an amended filing
									5
Դf։	ficial For	m 106A/E	3						
_		A/B: P	_						4045
				an accor	t only onco. If	an asset fits in more than one	catogory liet	the asset in	12/15
nink	t it fits best. Be	as complete and	accurate as possibl	e. If two	married peopl	le are filing together, both are entered to the least of	equally respo	nsible for su	pplying correct
	ver every questi		attacii a separate si	ieet to t	ilis ioilii. Oli ti	ie top of ally additional pages,	write your na	anie and case	e number (ii known).
Part	1: Describe E	Each Residence, E	Building, Land, or Ot	her Real	I Estate You O	wn or Have an Interest In			
. De	o vou own or ha	ave any legal or e	guitable interest in a	nv resid	dence. building	, land, or similar property?			
	No. Go to Part	, ,	•	•	, .				
Ξ	Yes. Where is								
	• res. where is	the property?							
1.1				What	t is the propert	y? Check all that apply			
	111 Curran		agription		Single-family	home			aims or exemptions. Put
	Street address, ii	available, or other de	scription			Iti-unit building			d claims on Schedule D: ms Secured by Property.
					Condominium	n or cooperative			
					Manufactured	d or mobile home	Current val	ue of the	Current value of the
	Cumberlan	nd RI State	02864-0000 ZIP Code			ron orth	entire prop	erty? 4,800.00	portion you own?
	City	State	ZIP Code		Investment policy Timeshare	горепу			\$264,800.00
					Other		(such as fee	simple, ten	our ownership interest ancy by the entireties, or
				Who		t in the property? Check one	a life estate), if known.	
	Providence	9			Debtor 2 only				
	County					Debtor 2 only	— Chack	if this is com	munity property
					At least one of	of the debtors and another	(see inst		initiality property
					r information y erty identificat	ou wish to add about this item ion number:	, such as loc	al	
				p. op	o , idonimodi				
_	A al al 4la - 11-11	number of the				fuero Deut 4 deselvelles			
						from Part 1, including any e		:>	\$264,800.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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ebtor 2	Sheryl Rennick	Ca	ase number (if known)	
Cars, vans	s, trucks, tractors, sport utility ve	hicles, motorcycles		
⊐ No				
■ Yes				
. 55				
.1 Make:	Chevy	Who has an interest in the property? Check one		ed claims or exemptions. Put
Model:	Cruze	■ Debtor 1 only		ecured claims on Schedule D: Claims Secured by Property.
Year:	2013	Debtor 2 only	Current value of the	Current value of the
• •	imate mileage: 30000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other in	nformation:	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$9,000.0	9,000.
2 Make:	Ford	Who has an interest in the property? Check one		ed claims or exemptions. Put
Model:	Escape	☐ Debtor 1 only		Claims Secured by Property
Year:	2011	■ Debtor 2 only	Current value of the	e Current value of the
Approx	imate mileage: 401,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other in	nformation:	\square At least one of the debtors and another		
		Check if this is community property (see instructions)	\$13,000.0	\$13,000.
3 Make:	Chevy	Who has an interest in the property? Check one	Do not deduct secure	ed claims or exemptions. Put
Model:	Silverado	Debtor 1 only		ecured claims on Schedule D Claims Secured by Property
Year:	2011	Debtor 2 only		, , ,
	imate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other in	nformation:	☐ At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$14,293.0	\$14,293.0
		d other recreational vehicles, other vehicles, an tercraft, fishing vessels, snowmobiles, motorcycle a		
1 Make:	Calico	Who has an interest in the property? Check one		ed claims or exemptions. Put
Model:		☐ Debtor 1 only		ecured claims on Schedule D Claims Secured by Property.
Year:	2005	☐ Debtor 2 only	Current value of the	e Current value of the
		■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other in	nformation:	\square At least one of the debtors and another	• = :	
horse	e trailer	Check if this is community property (see instructions)	\$500.00	\$500.
		n for all of your entries from Part 2, including ar		\$36,793.00
	ribe Your Personal and Household Ite			
you own	or have any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secure

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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	ebtor 1 ebtor 2	James Reni Sheryl Renr		(if known)
6.	Example	old goods and es: Major applia	furnishings nces, furniture, linens, china, kitchenware	
	□ No ■ Yes.	Describe		
		20000		
			furniture and appliances	\$6,000.00
7.	□ No	es: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners I phones, cameras, media players, games	; music collections; electronic devices
			electronics	\$1,500.00
	■ No □ Yes.	other collect Describe ent for sports a	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	
10	. Firearn Examp ■ No		s, shotguns, ammunition, and related equipment	
11	. Clothes Examp □ No	s	othes, furs, leather coats, designer wear, shoes, accessories	
			clothing	\$800.00
12	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches wedding bands and earrings	s, gems, gold, silver
13	Examp ■ No	rm animals bles: Dogs, cats, Describe	birds, horses	
14	■ No	her personal ar	d household items you did not already list, including any health aids you did n	ot list
15	5. Add t	he dollar value	of all of your entries from Part 3, including any entries for pages you have atta number here	ched \$8,900.00

Official Form 106A/B Schedule A/B: Property

page 3

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	btor 1 btor 2	James Renr Sheryl Renr			Case number (if known)	
Pa	rt 4: Des	cribe Your Finan	ncial Asset	s		
Do	you ow	n or have any l	legal or e	quitable interest in a	iny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			our wallet, in your hom	ne, in a safe deposit box, and on hand when you file your petition	
					Cash	\$50.00
	Examp				ints; certificates of deposit; shares in credit unions, brokerage hous with the same institution, list each.	ses, and other similar
	□ No ■ Yes				Institution name:	
			17.1.	checking and savings	TD Bank	\$100.00
			17.2.	Christmas Club	Pawtucket Municipal Employees Federal Credit Union	\$200.00
			17.3.	savings	Pawtucket Municipal Employees Federal Credit Union	\$150.00
			17.4.	share account	Navigant	\$23.00
			17.5.	share account	Pawtucket Municipal Employees Federal Credit Union	\$20.00
	Examp ■ No			cly traded stocks ent accounts with brok	erage firms, money market accounts	
	joint ve		tock and	interests in incorpor	rated and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No □ Yes.	Give specific int		about them me of entity:	 % of ownership:	
	Negotia Non-ne ■ No	able instruments	s include p ments are	personal checks, cashi those you cannot trans	able and non-negotiable instruments iers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
	_Examp	nent or pensior les: Interests in	n account		3(b), thrift savings accounts, or other pension or profit-sharing plar	ıs
	□ No ■ Yes. l	ist each accou		ely. of account:	Institution name:	
			401(a	a)	Voya Financial	\$14,000.00

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Debtor 1 Debtor 2	James Rennick, Jr. Sheryl Rennick		Case number (if ki	nown)
		TIAA		\$16,200.00
	401(k)	From Emplo	yer	\$243.00
Your	ity deposits and prepayments share of all unused deposits you have ples: Agreements with landlords, pre			ompanies, or others
■ No		Institution name	o or individual:	
⊔ Yes.		msutution name	e or individual.	
23. Annui ■ No	ties (A contract for a periodic paymer	nt of money to you, either for life	or for a number of years)	
	lssuer name and desc	cription.		
26 U.S	sts in an education IRA, in an accou .C. §§ 530(b)(1), 529A(b), and 529(b)		am, or under a qualified state tuition	on program.
■ No □ Yes.	Institution name and o	description. Separately file the re	ecords of any interests.11 U.S.C. § 5	521(c):
25. Trusts ■ No	s, equitable or future interests in pr	operty (other than anything li	sted in line 1), and rights or power	rs exercisable for your benefit
☐ Yes.	Give specific information about ther	n		
	ts, copyrights, trademarks, trade soples: Internet domain names, website			
	Give specific information about ther	n		
Exam	ses, franchises, and other general in ples: Building permits, exclusive licer		oldings, liquor licenses, professional	licenses
■ No □ Yes.	Give specific information about ther	n		
Money or	property owed to you?			Current value of the
				portion you own?Do not deduct secured claims or exemptions.
28. Tax re ■ No	funds owed to you			
	Give specific information about them	n, including whether you already	filed the returns and the tax years	
_	y support pples: Past due or lump sum alimony,	spousal support, child support, ı	maintenance, divorce settlement, pro	operty settlement
■ No □ Yes.	Give specific information			
Exam	amounts someone owes you ples: Unpaid wages, disability insurar benefits; unpaid loans you mad		s, sick pay, vacation pay, workers' c	ompensation, Social Security
■ No □ Yes.	Give specific information			
	sts in insurance policies ples: Health, disability, or life insurance	ce; health savings account (HSA	A); credit, homeowner's, or renter's in	nsurance
■ Yes.	Name the insurance company of eac Company nam		Beneficiary:	Surrender or refund value:

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Debtor 1 Debtor 2	James Rennick, Jr. Sheryl Rennick	Case number (if known)	
	West Coast Life	husband	\$0.00
	Brighthouse Financial	wife	\$0.00
If you somed	terest in property that is due you from someone who have the beneficiary of a living trust, expect proceeds from a one has died. Give specific information		eive property because
Examp ■ No	s against third parties, whether or not you have filed a labeles: Accidents, employment disputes, insurance claims, or		
☐ Yes.	Describe each claim		
■ No	contingent and unliquidated claims of every nature, inc Describe each claim	cluding counterclaims of the debtor and rights to	o set off claims
	nancial assets you did not already list		
■ No			
☐ Yes.	Give specific information		
	the dollar value of all of your entries from Part 4, includ art 4. Write that number here		\$30,986.00
Part 5: De	scribe Any Business-Related Property You Own or Have an Int	terest In. List any real estate in Part 1.	
_	own or have any legal or equitable interest in any business-rela	ated property?	
	o to Part 6.		
☐ Yes. (Go to line 38.		
	scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.	
	a own or have any legal or equitable interest in any farn Go to Part 7.	n- or commercial fishing-related property?	
Yes	Go to line 47.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	animals oles: Livestock, poultry, farm-raised fish		
■ res			
	3 goats		\$175.00
48. Crops - ■ No	either growing or harvested		

☐ Yes. Give specific information.....

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Debtor 2 Sheryl Rennick Case number (if known)

Debtor	2 Sheryl Rennick			Case number (if known)	
49. Far ■ N	•	nt, implements, machinery, fixtures,	and tools of trade		
ΠY	'es				
	m and fishing supplies,	chemicals, and feed			
■ N □ Y	lo ′es				
51. An y	y farm- and commercial	fishing-related property you did not	t already list		
■ N	lo				
ΠY	es. Give specific informa	iion			
		l of your entries from Part 6, includi			\$175.00
Part 7:	Describe All Property	y You Own or Have an Interest in That Yo	ou Did Not List Above		
Ex	amples: Season tickets, o		t?		
		misc. tools			\$1,500.00
		l of your entries from Part 7. Write th	hat number here		\$1,500.00
Part 8:	List the Totals of Each				
55. P a	art 1: Total real estate, l	ine 2			\$264,800.00
	art 2: Total vehicles, line		\$36,793.00		
	•	d household items, line 15	\$8,900.00		
	art 4: Total financial ass	•	\$30,986.00		
	art 5: Total business-rel	• • •	\$0.00		
		shing-related property, line 52	\$175.00		
61. P a	art 7: Total other proper	ty not listed, line 54	+ \$1,500.00		
62. T o	otal personal property.	Add lines 56 through 61	\$78,354.00	Copy personal property to	tal \$78,354.00
63. T o	otal of all property on Se	chedule A/B. Add line 55 + line 62			\$343,154.00

Official Form 106A/B Schedule A/B: Property page 7

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		Восин	111 1 0100 11 01 00	,
Fill in this infor	mation to identify your	case:		
Debtor 1	James Rennick,	Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Sheryl Rennick			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	ISLAND	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$264,800.00		\$500,000.00	R.I. Gen. Laws § 9-26-4.1
		100% of fair market value, up to any applicable statutory limit	
\$9,000.00		\$2,134.00	R.I. Gen. Laws § 9-26-4(16
		100% of fair market value, up to any applicable statutory limit	
\$13,000.00		\$4,924.00	R.I. Gen. Laws § 9-26-4(13
		100% of fair market value, up to any applicable statutory limit	
\$14,293.00		\$12,000.00	R.I. Gen. Laws § 9-26-4(13
		100% of fair market value, up to any applicable statutory limit	
\$14,293.00		\$2,293.00	R.I. Gen. Laws § 9-26-4(16
		100% of fair market value, up to any applicable statutory limit	
	\$264,800.00 \$9,000.00 \$13,000.00	\$13,000.00 \$14,293.00 \$14,293.00	Copy the value from Schedule A/B \$264,800.00 \$264,800.00 \$264,800.00 \$264,800.00 \$360,000.

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Debtor 1 **Sheryl Rennick** Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2005 Calico R.I. Gen. Laws § 9-26-4(16) \$500.00 \$500.00 horse trailer Line from Schedule A/B: 4.1 100% of fair market value, up to any applicable statutory limit furniture and appliances R.I. Gen. Laws § 9-26-4(3) \$6,000.00 \$6,000.00 Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit electronics R.I. Gen. Laws § 9-26-4(3) \$1,500.00 \$1,500.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit clothing R.I. Gen. Laws § 9-26-4(1) \$800.00 \$800.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit wedding bands and earrings R.I. Gen. Laws § 9-26-4(14) \$4,000.00 \$600.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash R.I. Gen. Laws § 9-26-4(16) \$50.00 \$50.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit checking and savings: TD Bank R.I. Gen. Laws § 9-26-4(16) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Christmas Club: Pawtucket** R.I. Gen. Laws § 9-26-4(16) \$200.00 \$200.00 Municipal Employees Federal Credit Union 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17.2 savings: Pawtucket Municipal R.I. Gen. Laws § 9-26-4(16) \$150.00 \$150.00 **Employees Federal Credit Union** Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit share account: Navigant R.I. Gen. Laws § 9-26-4(16) \$23.00 \$23.00 Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit share account: Pawtucket Municipal R.I. Gen. Laws § 9-26-4(16) \$20.00 \$20.00 **Employees Federal Credit Union** Line from Schedule A/B: 17.5 100% of fair market value, up to any applicable statutory limit

James Rennick, Jr.

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James Rennick, Jr.

Sheryl Rennick Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 401(a): Voya Financial R.I. Gen. Laws § 9-26-4(12) 100% \$14,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit TIAA R.I. Gen. Laws § 9-26-4(12) 100% \$16,200.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 401(k): From Employer R.I. Gen. Laws § 9-26-4(12) 100% \$243.00 Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit 3 goats R.I. Gen. Laws § 9-26-4(16) \$175.00 \$175.00 Line from Schedule A/B: 47.1 100% of fair market value, up to any applicable statutory limit misc. tools R.I. Gen. Laws § 9-26-4(2) \$1,500.00 \$1,500.00 Line from Schedule A/B: 53.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Debtor 1

Cas	SE 1.19-0K-10363	Document Page 20	ereu 04/14/19 . N of 55	15.56.30 Desi	z Main
Fill in this info	ormation to identify you		·		
Debtor 1	James Rennick	, Jr.			
	First Name	Middle Name Last Name		•	
Debtor 2	Sheryl Rennick				
(Spouse if, filing)	First Name	Middle Name Last Name			
United States	Bankruptcy Court for the:	DISTRICT OF RHODE ISLAND			
Case number (if known)				_	if this is an led filing
Official Fo					
Schedul	e D: Creditors	Who Have Claims Secure	d by Propert	у	12/15
■ Yes. Fi	eck this box and submit to the information the AII Secured Claims	his form to the court with your other schedules. Y below.		·	
		more than one secured claim, list the creditor separately		Column B	Column C
		s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Embrac	e Home Loans	Describe the property that secures the claim:	\$212,149.00	\$264,800.00	\$0.00
Creditor's N	ame	111 Curran Road Cumberland, RI 02864 Providence County			
PO Box Charlot	te, NC 28219	As of the date you file, the claim is: Check all that apply. Contingent			
Number, St	reet, City, State & Zip Code	☐ Unliquidated			
Who owes the	debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or se	cured		
Debtor 2 only	•	car loan)	cuidu		
■ Debtor 1 and		☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one	of the debtors and another	☐ Judgment lien from a lawsuit			

Mortgage

9420

Other (including a right to offset)

Last 4 digits of account number

 \square Check if this claim relates to a

Date debt was incurred 2016

community debt

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Debtor 1 James Rennick, Jr.		ase number (if known)		
First Name Middle N	lame Last Name			
Debtor 2 Sheryl Rennick First Name Middle N	lame Last Name			
First Name - Middle N	ame Last Name			
Pawtucket Municipal				
Employees	Describe the property that secures the claim:	\$6,866.00	\$9,000.00	\$0.00
Creditor's Name	2013 Chevy Cruze 30000 miles			
Federal Credit Union	As of the date you file, the claim is: Check all that			
137 Roosevelt Avenue	apply.			
Pawtucket, RI 02860	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgage or sec	ured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ıto Loan		
Date debt was incurred 2016	Last 4 digits of account number 1003			
Douglast Municipal				
2.3 Pawtucket Municipal Employees	Describe the property that secures the claim:	\$8,076.00	\$13,000.00	\$0.00
Creditor's Name	2011 Ford Escape 401,000 miles			
	20111 Old E30ape 401,000 Illies			
Federal Credit Union				
137 Roosevelt Avenue	As of the date you file, the claim is: Check all that apply.			
Pawtucket, RI 02860	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	ured		
■ Debtor 2 only	car loan)	urcu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a		ıto I oan		
community debt	Other (including a right to offset) Secured Au	no Louii		
Date debt was incurred 2016	Last 4 digits of account number 0325			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$227,091.00		
If this is the last page of your form, add		ΨΞΞ.,σσσσ		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	Odde 1:13 BK 10000	Document Document	Page 2	2 of 55	00.00	Desc Main
Fill in this	s information to identify your ca			- 0.00		
Debtor 1	James Rennick, Jr.					
DODIOI 1	First Name	Middle Name	Last Name			
Debtor 2	Sheryl Rennick					
(Spouse if, fil	ing) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	DISTRICT OF RHODE ISLAND				
Case num	nber					
(if known)						Check if this is an
						amended filing
Official	Form 106E/F					
	ule E/F: Creditors Wh	o Have Uncocured (Naime			12/15
	plete and accurate as possible. Use					
eft. Attach	: Creditors Who Have Claims Secur the Continuation Page to this page. ase number (if known). List All of Your PRIORITY Unser	If you have no information to repo				
1. Do any	creditors have priority unsecured	claims against you?				
■ No.	Go to Part 2.	-				
☐ Yes						
	List All of Your NONPRIORITY	Unsecured Claims				
	/ creditors have nonpriority unsecu					·
	You have nothing to report in this part		our other sche	adules		
_		a. Oubline and form to the boart man ye	our ourior corre	Judioo.		
Yes	S.					
unsecu	l of your nonpriority unsecured clain ured claim, list the creditor separately for the creditor holds a particular claim, list	or each claim. For each claim listed, i	dentify what t	ype of claim it is. Do not list c	aims already i	included in Part 1. If more
						Total claim
4.1 C	abela s Club Capital One	Last 4 digits of accou	unt number	4013		\$5,337.00
N	onpriority Creditor's Name					
	O Box 30285 alt Lake City, UT 84130	When was the debt in	ncurred?	2017		_
N	umber Street City State Zip Code	As of the date you file	e, the claim i	s: Check all that apply		
	ho incurred the debt? Check one.	·	•	11.7		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
_	At least one of the debtors and anoth	ner Type of NONPRIORIT	Y unsecured	d claim:		
_	Check if this claim is for a commu	Ot				
de	ebt	☐ Obligations arising		ration agreement or divorce t	nat you did no	t
	the claim subject to offset?	report as priority claim				
	No	•	•	g plans, and other similar deb		
] _{Yes}	Other Specify C	redit card	purchases and intere	est	

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or 1 James Rennick, Jr.		
	Case number (if known)	
Capital One	Last 4 digits of account number 8526	\$3,131.00
PO Box 30285	When was the debt incurred? 2015	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	<u> </u>	
	1	
	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you direport as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	
Citi	Last 4 digits of account number 3291	\$1,595.00
Nonpriority Creditor's Name		
	When was the debt incurred? 2018	
	As of the date you file, the claim is: Check all that apply	
, ,	no of the date you me, the claim is. Shook an that apply	
	Contingent	
Debtor 2 only		
•	•	
_	<u> </u>	
debt		d not
Is the claim subject to offset?	report as priority claims	a not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Credit card purchases and interest	
Comenity Bank	Last 4 digits of account number 6621	\$374.00
Nonpriority Creditor's Name Bankruptcy Department PO Box 182125	When was the debt incurred? 2018	
Columbus, OH 43218-2125 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
<u> </u>		
-	Type of NONPRIORITY unsecured claim:	
	Capital One Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130-0253 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Citi Nonpriority Creditor's Name PO Box 6500 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Comenity Bank Nonpriority Creditor's Name Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 colly Debtor 1 colly Debtor 2 only	Capital One Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130-0253 Number Street City State 2 pc Ode Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Cit! Nopriority Creditor's Name PO Box 5500 Sloux Falls, SD 57117 Number Street City State 2 pc Ode Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Do Box 18125 Columbus, OH 43218-2125 Number Street City State 2 pc Ode Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Contingent Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Contingent Debtor 6 and Debtor 9 and Debtor 9 and Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Committy Bank Nopriority Creditor's Name PO Box 182125 Columbus, OH 43218-2125 Number Street City State 2 pc Ode Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Do Box 182125 Columbus, OH 43218-2125 Number Street City State 2 pc Ode Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Creditor's Name Bankruptox Department PO Box 182125 Columbus, OH 43218-2125 Number Street City State 2 pc Ode Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 onl

■ No

☐ Yes

☐ Student loans

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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	or 1 James Rennick, Jr. Sheryl Rennick	Case number (if known)	
4.5	Discover Bank	Last 4 digits of account number 0665	\$4,332.00
	Nonpriority Creditor's Name PO Box 30421 Salt Lake City, UT 84130-0421	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases and interest	
4.6	Elmwood Orthopedic Rehab	Last 4 digits of account number	\$514.00
	Nonpriority Creditor's Name 193 Elmwood Ave Providence, RI 02907	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.7	Lending Club Corporation	Last 4 digits of account number 3247	\$22,463.00
	Nonpriority Creditor's Name 71 Stevenson Suite 300 San Francisco, CA 94105	When was the debt incurred? 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	in the chair is for a community		

debt

■ No
□ Yes

Is the claim subject to offset?

■ Other. Specify loan

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Case 1:19-bk-10583 Doc 1 Filed 04/14/19 Entered 04/14/19 15:56:30 Desc Main Document Page 25 of 55

		*
Navigant Credit Union Nonpriority Creditor's Name	Last 4 digits of account number 3896	\$32
693 Broad Street Central Falls, RI 02863-2339	When was the debt incurred? 2010	-
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Line of Credit	_
Pawtucket Municipal Employees	Last 4 digits of account number 0000	\$8,77
Nonpriority Creditor's Name Federal Credit Union	When was the debt incurred? 2016	
137 Roosevelt Avenue		_
Pawtucket, RI 02860		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	Other. Specify Ioan	-
Pawtucket Municipal Employees	Last 4 digits of account number 0000	\$6,21
Nonpriority Creditor's Name		
Federal Credit Union 137 Roosevelt Avenue	When was the debt incurred? 2017	_
Pawtucket, RI 02860		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify loan	

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2 Sheryl Rennick		Case number (if known)	
Sears Credit Cards	Last 4 digits of account number	2147	\$490.00
Nonpriority Creditor's Name PO Box 6282	When was the debt incurred?	2015	
Sioux Falls, SD 57117-6282 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit card	purchases and interest	
Sun Run	Last 4 digits of account number	5405	\$29,234.00
Nonpriority Creditor's Name 595 Market St 29th Floor	When was the debt incurred?	2018	. ,
San Francisco, CA 94105 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim?	3. Oneok an that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify financing for	or solar panels	
SYNCB Paypal Smart Connect	Last 4 digits of account number	8182	\$2,038.00
Nonpriority Creditor's Name PO Box 965060	When was the debt incurred?	2012	<u> </u>
Orlando, FL 32896-5061			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Constituent		
Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other. Specify	purchases and interest	

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NCB Walmart	Last 4 digits of account number	8129	\$62.
priority Creditor's Name Box 965060	When was the debt incurred?	2014	
ando, FL 32896 her Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
t ne claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
⁄es	Other. Specify Credit card	purchases and interest	
Bank	Last 4 digits of account number	3377	\$9,627.
priority Creditor's Name			+0,0
Box 84037	When was the debt incurred?	2017	
lumbus, GA 31908-4037 hber Street City State Zip Code	As of the date you file, the claim i	s: Chack all that apply	
o incurred the debt? Check one.	As of the date you me, the claim i	э. Опеск ан так арргу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
t	Obligations arising out of a sepa	ration agreement or divorce that you did not	
ne claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
⁄es	Other. Specify Credit card	purchases and interest	
lls Fargo EFS	Last 4 digits of account number	6214	\$8,462
priority Creditor's Name	_		
Box 84712	When was the debt incurred?	2018	
bux Falls, SD 57118-4712 her Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
incurred the debt? Check one.	-		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
t ne claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not	
ie ciaini subject to onset?			
No	Debts to pension or profit-sharin	g plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 James Rennick, Jr. Debtor 2 Sheryl Rennick	Case number (if known)				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
American Profit Recovery	Line <u>4.6</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
33 Boston Post Rd W No 140 Marlborough, MA 01752	I	Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?			
American Profit Recovery	Line <u>4.6</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
34505 W 12 Mile Rd Ste 333 Farmington, MI 48331-5608	I	Part 2: Creditors with Nonpriority Unsecured Claims			
1 ammigton, iii 40001-0000	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Radius Global Solutions LLC	Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 390905 Minneapolis, MN 55439	ı	Part 2: Creditors with Nonpriority Unsecured Claims			
Willingapons, Wild 33433	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?			
Sun Run	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 511612 Los Angeles, CA 90051-8167	ı	Part 2: Creditors with Nonpriority Unsecured Claims			
LOS Allycies, CA 30031-0107	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 8,462.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 94,512.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 102,974.00

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			111 1 11111111 23 (11 33)	
Fill in this infor	mation to identify your	case:		
Debtor 1	James Rennick,	Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Sheryl Rennick			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	ISLAND	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	- 11		0.0.0		
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 30 d	of 55
Fill in this	information to identify your	case:		
Debtor 1	James Rennick,	.lr		
20010	First Name	Middle Name	Last Name	
Debtor 2	Sheryl Rennick			
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	DISTRICT OF RHODE	ISLAND	
Case numb (if known)	per			☐ Check if this is an
(amended filing
Official	Form 106H			
		la la tama		
<u>Scnea</u>	ule H: Your Cod	eptors		12/15
■ No □ Yes 2. With Arizona ■ No. □ Yes. 3. In Colu	a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	u lived in a community pr , Nevada, New Mexico, Pu use, or legal equivalent live	operty state or territor erto Rico, Texas, Wash with you at the time?	y? (<i>Community property states and territories</i> include ington, and Wisconsin.) If your spouse is filing with you. List the person shown
Form 1				sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
N	lame, Number, Street, City, State and Z	IP Code		Check all schedules that apply:
0.4				По
3.1	Name			Schedule D, line
	valle			Schedule E/F, line
				☐ Schedule G, line
<u> </u>	Number Street			_
C	City	State	ZIP Code	
3.2	Nama			Schedule D, line
r	Name			Schedule E/F, line
				☐ Schedule G, line
N	Number Street			_
(City	State	ZIP Code	

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Del	otor 1 James Rer	nick, Jr.		
	otor 2 Sheryl Ren	nick		
Uni	ted States Bankruptcy Court for th	e: DISTRICT OF RHOD	DE ISLAND	
	se number nown)			neck if this is: An amended filing A supplement showing postpetition chapter
			_	13 income as of the following date:
	fficial Form 106I			MM / DD/ YYYY
	chedule I: Your Inc			12/15 ebtor 2), both are equally responsible for
	t 1: Describe Employmen Fill in your employment	. ,	ional pages, write your name and case	number (if known). Answer every question
١.	information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status	Employed	■ Employed
	information about additional employers.		☐ Not employed	☐ Not employed
	• •	Occupation	utility worker	medical receptionist
	Include part-time, seasonal, or self-employed work.	Employer's name	Pawtucket Water Supply Board	XRA Associates
	Occupation may include student or homemaker, if it applies.	Employer's address	85 Branch Street Pawtucket, RI 02860	Cranston, RI 02920
		How long employed t	there? 5 years	just started
Pai	t 2: Give Details About Mo	onthly Income		
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to report for any line, w	rite \$0 in the space. Include your non-filing
	u or your non-filing spouse have n e space, attach a separate sheet t		ombine the information for all employers t	for that person on the lines below. If you need
			For I	Debtor 1 For Debtor 2 or

4. Calculate gross Income. Add line 2 + line 3. 4. \$ 4,089.00 \$

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Official Form 106I Schedule I: Your Income page 1

4,089.00

0.00

+\$

3.

2,838.00

2,838.00

0.00

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Debt Debt		James Rennick, Jr. Sheryl Rennick		Cas	se number (if known)			
				F	or Debtor 1		or Debtor 2 or on-filing spouse	
	Cop	by line 4 here	4.	\$	4,089.00	\$	2,838.00	
5.	l ist	all payroll deductions:				-		
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	324.00	\$	642.00	
	5b.	Mandatory contributions for retirement plans	5a. 5b.	\$	80.00	\$ \$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	438.00	\$-	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	49.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+		0.00	+ \$ -	0.00	
6.	Δdc	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	– 6.	\$	891.00	\$	642.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,198.00	\$	2,196.00	
			٠.	Ψ	3,190.00	Ψ_	2,190.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$_	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	_	contribution from daughter for car	-			_		
	8h.	Other monthly income. Specify: insurance	_ 8h.+	- \$	100.00	+ \$_	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	100.00	\$	0.00	
10	Cal	aulate monthly income. Add line 7 u line 0	10 6		2 200 00 . 6		400.00	404.00
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,298.00 + \$_		2,196.00 = \$ 5	,494.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a scify:	depen		•	-		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies						,494.00
13.	Do	you expect an increase or decrease within the year after you file this form	?				Combined monthly i	
		No. Yes Evolain:						

						İ				
	in this informa	tion to identify yo	our case:							
Deb	otor 1	James Renn	ick, Jr.			Check	c if this is:			
	otor 2	Sheryl Renn	ick				☐ A supplement showing postpetition			
(Spo	ouse, if filing)					1	3 expenses as or	the following date:		
Unit	ted States Bankı	ruptcy Court for the	: DISTRI	CT OF RHODE ISLAND		<u> </u>	MM / DD / YYYY			
	se number nown)									
O	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	ises				12/15		
Be	as complete ormation. If m	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this						
Par 1.	t 1: Desci	ribe Your House	ehold							
١.	☐ No. Go to	line 2.								
			in a separ	ate household?						
	■ N □ Y		st file Offic	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.			
2.	Do you hay	e dependents?	□ No							
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent				Dependent's relati			Does dependent live with you?		
					daughter - full student	time	19	□ No ■ Yes		
					father		74	□ No ■ Yes		
								□ No		
								☐ Yes		
								□ No □ Yes		
3.	, ,	enses include		No				□ 162		
	•	f people other t d your depende	han \Box	Yes						
Par	t 2: Estim	ate Your Ongoi	na Month	ly Expenses						
Est	imate your ex	cpenses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses		
(0)	noiai i oi ii i i	,01.,								
4. The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.				nclude first mortgage	e 4. \$		1,657.00			
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00		
	•	rty, homeowner'				4b. \$		0.00		
		maintenance, re owner's associa		upkeep expenses dominium dues		4c. \$ 4d. \$		160.00 0.00		
5.				our residence, such as ho	me equity loans	5. \$		0.00		

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	James Rennick, Jr. Sheryl Rennick	Case num	ber (if known)	
CDIOI Z	oneryr Neilliuk	Case num	nei (ii kiiuwiii)	
. Utilitie				
6a.	Electricity, heat, natural gas	6a.		350.00
6b.	Water, sewer, garbage collection	6b.	\$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	360.00
6d. (Other. Specify:	6d.	\$	0.00
. Food a	and housekeeping supplies	7.	\$	900.00
Childo	are and children's education costs	8.	\$	0.00
Clothi	ng, laundry, and dry cleaning	9.	\$	180.00
). Persoi	nal care products and services	10.	\$	160.00
. Medica	al and dental expenses	11.	\$	90.00
2. Trans	portation. Include gas, maintenance, bus or train fare.			
	include car payments.	12.	\$	425.00
3. Entert	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	175.00
. Charit	able contributions and religious donations	14.	\$	60.00
5. Insura	nce.			
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	45.00
	Health insurance	15b.	·	0.00
15c. `	Vehicle insurance	15c.	\$	562.00
	Other insurance. Specify:	15d.	\$	0.00
. Taxes.	Do not include taxes deducted from your pay or included in lines 4 or 2	0.		
Specify	/: Auto Excise Tax	16.	\$	98.00
Specify	Fire District Taxes		\$	50.00
7. Install	ment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	250.00
17b.	Car payments for Vehicle 2	17b.	\$	220.00
17c. (Other. Specify:	17c.	\$	0.00
17d. (Other. Specify:	17d.	\$	0.00
. Your p	payments of alimony, maintenance, and support that you did not re	oort as		
	ted from your pay on line 5, Schedule I, Your Income (Official Form	106I). 18.	·	0.00
. Other	payments you make to support others who do not live with you.		\$	0.00
Specify		19.		
	real property expenses not included in lines 4 or 5 of this form or o			
20a. l	Mortgages on other property	20a.	·	0.00
20b. I	Real estate taxes	20b.	*	0.00
20c. l	Property, homeowner's, or renter's insurance	20c.	*	0.00
20d. l	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. l	Homeowner's association or condominium dues	20e.	\$	0.00
. Other:	Specify: professional license	21.	+\$	6.00
bank	· · · · · · · · · · · · · · · · · · ·		+\$	20.00
	turn preparation fees		+\$	15.00
	ate your monthly expenses			
	dd lines 4 through 21.		\$	5,863.00
22b. C	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	5,863.00
Colour	ate your monthly not income			
	ate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	23a.	¢	E 404 00
	, ,		*	5,494.00
23b. (Copy your monthly expenses from line 22c above.	23b.	-\$	5,863.00
230	Subtract your monthly expenses from your monthly income			
	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-369.00
	The result is your monthly net income.	_50.		
For exa modifica	u expect an increase or decrease in your expenses within the year ample, do you expect to finish paying for your car loan within the year or do you expation to the terms of your mortgage?			ease or decrease because of a
■ No.				
☐ Yes	Explain here:			

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Fill in this infor	rmation to identify your	case:					
Debtor 1	James Rennick,	lr.					
	First Name	Middle Name	Last	Name			
Debtor 2	Sheryl Rennick						
(Spouse if, filing)	First Name	Middle Name	Last	Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE ISL	.AND				
Case number							
(if known)							Check if this is an amended filing
If two married p You must file th	eople are filing togethe	r, both are equally responsing both are equally responsion to connection with a bankruph and 3571	ble for so	ipplying co	orrect information. es. Making a false sta		
years, or both.	10 0.0.0. 33 102, 1041, 1	515, and 5571.					
Sig	gn Below						
Did you pa	ay or agree to pay some	one who is NOT an attorne	y to help	you fill out	bankruptcy forms?		
■ No							
☐ Yes.	Name of person						atition Preparer's Notice, ature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summa	iry and s	chedules fil	led with this declara	tion and	
X /s/ Jar	mes Rennick, Jr.		_ x		l Rennick		
	s Rennick, Jr.			Sheryl Re			
Signatu	ure of Debtor 1			Signature of	of Debtor 2		
Date	April 11, 2019			Date Ap	ril 11, 2019		

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		nation to identify your				
Debt	tor 1	James Rennick, First Name	Jr. Middle Name	Last Name		
Debt	tor 2	Sheryl Rennick				
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT OF RHODE IS	LAND		
Case number					_	heck if this is an mended filing
Sta Be as	s complete a	of Financial And accurate as possi ore space is needed,	ble. If two married people a attach a separate sheet to		ankruptcy equally responsible for sup additional pages, write you	
Part		n). Answer every ques Details About Your Ma	stion. irital Status and Where You	Lived Before		
		current marital statu				
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
state	s and territori	es include Arizona, Ca		vada, New Mexico, Puerto Ri	ity property state or territory co, Texas, Washington and W	
Part	2 Explai	n the Sources of You	r Income			
	Fill in the tota	al amount of income you	u received from all jobs and a	g a business during this yeall businesses, including partetogether, list it only once un		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$13,956.00	■ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	heryl Rennic			Ca	ase number (if known)	
			Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply	
For last cale (January 1 to	ndar year: o December 3	1, 2018)	■ Wages, commissions, bonuses, tips	\$60,167.00	■ Wages, commis bonuses, tips	sions, \$23,714.00
			☐ Operating a business		☐ Operating a bus	iness
	ndar year befo o December 3		■ Wages, commissions, bonuses, tips	\$74,628.00	☐ Wages, commis bonuses, tips	sions, \$0.00
			☐ Operating a business		☐ Operating a bus	iness
List each		e gross inco	e and you have income that me from each source separa	,	e that you listed in line 4.	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	e Gross income (before deductions and exclusions)
For last cale (January 1 to	endar year: o December 3	1, 2018)		\$0.00	Unemployment	\$368.00
				\$0.00	temporary disab insurance	pility \$2,348.00
6. Are eithe	er Debtor 1's of Neither Debtor 1's of Neither Debtor 1 or During the 9	or Debtor 2's tor 1 nor D imarily for a 0 days befor Go to line 7. List below e paid that crenot include padjustment Debtor 2 or 0 days befor 0 days befor	personal, family, or househore you filed for bankruptcy, deach creditor to whom you pare ditor. Do not include payments an attorney for ton 4/01/22 and every 3 years both have primarily construction filed for bankruptcy, described to house the you filed for bankruptcy.	r debts? umer debts. Consumer de old purpose." id you pay any creditor a to id a total of \$6,825* or more onts for domestic support ob his bankruptcy case. Its after that for cases filed co	etal of \$6,825* or more? e in one or more paymentigations, such as child son or after the date of ad	S.C. § 101(8) as "incurred by an number of the stand the total amount you support and alimony. Also, do justment.
	□ Yes	include payr	ach creditor to whom you pa			paid that creditor. Do not , do not include payments to an
Credito	r's Name and	Address	Dates of payme	ent Total amount paid	Amount you W	as this payment for

Deb	tor 2	Sheryl Rennick		Cas	se number (if known)		
7.	<i>Inside</i> of whi	n 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 my.	artners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which yog g securities; and a	u are a genera ny managing a	Il partner; corporations gent, including one fo
		No					
		Yes. List all payments to an insider.					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	inside	n 1 year before you filed for bankrupter? le payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	I N	No					
		Yes. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for Include cred	this payment
Par	4.	Identify Legal Actions, Repossession	no and Farceleaures	paid	Still Owe	molade crea	itoi s riame
9.	Within List al modifi	n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes.	cy, were you a party in an				
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
10.		n 1 year before you filed for bankrupt c all that apply and fill in the details below		erty repossessed, f	foreclosed, garnis	shed, attached	l, seized, or levied?
		No. Go to line 11. Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date		Value of the
			Explain what happened	i			property
11.	accou	n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fii	nancial institution	ı, set off any a	mounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	court	n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		erty in the possess			fit of creditors, a
		Yes					
Par	t 5:	List Certain Gifts and Contributions					
13.	I N	n 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person?	•
	Gifts	with a total value of more than \$600 person	Describe the gifts		Dates the g	s you gave ifts	Value
	Perse Addr	on to Whom You Gave the Gift and ress:					

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	btor 2 Sheryl Rennick		Cas	se number (if	known)	
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or			with a total v	alue of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value
Par	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy o	r since you filed for bankruptcy, did you	u lose anythi	ng because of the	ft, fire, other disaster,
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred		ribe any insurance coverage for the los		Date of your loss	Value of property lost
	now the loss occurred		de the amount that insurance has paid. List ance claims on line 33 of <i>Schedule A/B: Pr</i>	t penaing	1033	1031
Par	tt 7: List Certain Payments or Transfe	rs				
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid Address Email or website address	prepare		ty	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not John S Simonian Esq 474 Broadway Pawtucket RI PO Box 2 Pawtucket, RI 02862 www.law-ri.com	Tou	counsel fee		3-19	\$1,400.00
	Abacus Credit Counseling 15760 Ventura Blvd Suite 205 Encino, CA 91316 www.abacuscc.org		credit counseling course		3-19	\$20.00
17.	Within 1 year before you filed for bankr promised to help you deal with your cree Do not include any payment or transfer that	editors	or to make payments to your creditors?	ehalf pay or ?	transfer any prope	erty to anyone who
	No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propert transferred		Date payment or transfer was made	Amount of payment

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James Rennick, Jr. Debtor 1 **Sheryl Rennick** Debtor 2

Case number (if known)

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	iness or financial affa e as security (such as the	irs? ne granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and vo			any property or s received or debts schange	Date transfer was made
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details.		y property to a se	elf-settled tr	ust or similar device o	of which you are a
	Name of trust	Description and va	alue of the prope	rty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or descriptions of the property of the pr	other financial accoun	its; certificates o			
	houses, pension funds, cooperatives, associa No Yes. Fill in the details.	tions, and other finan	ciai institutions.			
		ast 4 digits of ccount number	Type of accoun instrument	cle m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	safe depos	it box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		escribe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ear before y	ou filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the	contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	de any property	you borrow	ed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe the	property	Value
	t 10: Give Details About Environmental Inform					
For	the purpose of Part 10, the following definition	s apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 **James Rennick, Jr.**Debtor 2 **Sheryl Rennick**

Case number (if known)

		ic substances, wastes, or material into t ulations controlling the cleanup of these	· · · · · · · · · · · · · · · · · · ·	dwate	er, or other medium, including s	tatutes or
		e means any location, facility, or propert own, operate, or utilize it, including disp	•	law,	whether you now own, operate,	or utilize it or used
		zardous material means anything an env ardous material, pollutant, contaminant		s was	ste, hazardous substance, toxic	substance,
₹ер	ort a	all notices, releases, and proceedings th	nat you know about, regardless of whe	n the	y occurred.	
24.	Has	s any governmental unit notified you tha	nt you may be liable or potentially liable	und	ler or in violation of an environm	ental law?
		No				
		Yes. Fill in the details.				
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
25.	Hav	ve you notified any governmental unit of	f any release of hazardous material?			
		No Yes. Fill in the details.				
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
26.	Hav	ve you been a party in any judicial or adı	ministrative proceeding under any env	ironn	mental law? Include settlements	and orders.
		No Yes. Fill in the details.				
	Ca	se Title	Court or agency	Nat	ture of the case	Status of the
	Ca	se Number	Name Address (Number, Street, City, State and ZIP Code)			case
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrup	tcy, did you own a business or have ar	ny of	the following connections to an	y business?
		☐ A sole proprietor or self-employed i	in a trade, profession, or other activity,	, eith	er full-time or part-time	
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnersh	ıip (L	LP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	recutive of a corporation			
		☐ An owner of at least 5% of the votin	ng or equity securities of a corporation			
		No. None of the above applies. Go to	Part 12.			
		••	I in the details below for each business	s.		
		siness Name	Describe the nature of the business		Employer Identification number	er
		Idress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	number or ITIN.
28.		hin 2 years before you filed for bankrup titutions, creditors, or other parties.	tcy, did you give a financial statement	to an		ude all financial
		No				
		Yes. Fill in the details below.				
	Ad	me Idress mber, Street, City, State and ZIP Code)	Date Issued			

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Debtor 1	James Rennick, Jr.		3.9	
Debtor 2	Sheryl Rennick		Case number (if kno	wn)
Part 12:	Sign Below			
I have rea	d the answers on this Statement of Financial	A <i>ffairs</i> an	d any attachments, and I declare under r	penalty of periury that the answers
	nd correct. I understand that making a false st			, , , ,
	nkruptcy case can result in fines up to \$250,00	0, or imp	isonment for up to 20 years, or both.	
18 U.S.C.	§§ 152, 1341, 1519, and 3571.			
/s/ Jame	es Rennick, Jr.	/s/ Sh	ryl Rennick	
James F	Rennick, Jr.		Rennick	_
Signature	e of Debtor 1	Signat	re of Debtor 2	
Date A	pril 11, 2019	Date	April 11, 2019	_
Did you at	ttach additional pages to <i>Your Statement of Fi</i>	nancial A	ffairs for Individuals Filing for Bankrupte	cy (Official Form 107)?
■ No			,	,
☐ Yes				
	ay or agree to pay someone who is not an atto	rney to h	elp you fill out bankruptcy forms?	
No				
☐ Yes. Na	ame of Person Attach the Bankruptcy Pet	ition Prep	arer's Notice, Declaration, and Signature (C	fficial Form 119).

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Fill in this infor	mation to identify your	case:			
Debtor 1	James Rennick,	Jr.			
	First Name	Middle Name	Last Name		
Debtor 2	Sheryl Rennick				
(Spouse if, filing)	First Name	Middle Name	Last Name		
Case number	ankruptcy Court for the:	DISTRICT OF RHODE	IOLAINU		ack if this is an
(if known)					eck if this is an
				ame	ended filing
Official Fo	orm 108				
Stateme	nt of Intentio	n for Individu	uals Filing Unde	r Chapter 7	12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Creditor's **Embrace Home Loans** \square Surrender the property. □ No name: ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Yes Description of 111 Curran Road Cumberland, Reaffirmation Agreement. RI 02864 Providence County property Retain the property and [explain]: securing debt: Petitioner shall retain the secured property and continue to make payments. Creditor's **Pawtucket Municipal Employees** ☐ Surrender the property. □ No name: ☐ Retain the property and redeem it. Yes ☐ Retain the property and enter into a Description of 2013 Chevy Cruze 30000 miles Reaffirmation Agreement. property Retain the property and [explain]: securing debt: Petitioner shall retain the secured property and continue to make payments.

☐ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

Description of 2011 Ford Escape 401,000 miles

Pawtucket Municipal Employees

Creditor's

name:

☐ No

Yes

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	James Rennick, Jr. Sheryl Rennick	Case number (if known)
property securing		Retain the property and [explain]: Petitioner shall retain the secured property and continue to make payments.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes

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Debtor 2		ames Rennick, Jr. heryl Rennick			Case number (if known)	
Part 3:	Sig	n Below				
property	that	is subject to an unexpired leas	e.		y property of my estate that secures a debt	and any personal
		es Rennick, Jr.	X		Sheryl Rennick	
Ja	mes	Rennick, Jr.		Sh	eryl Rennick	
Sig	gnatur	e of Debtor 1		Sig	gnature of Debtor 2	
Da	ite	April 11, 2019	Da	te	April 11, 2019	

Fill in this informs	ation to information or an arrangement of the state of th							
	ation to identify your case:			eck one 2A-1Su		irected	in this form and	in Form
Debtor 1	James Rennick, Jr.			_,	γγ.			
Debtor 2 (Spouse, if filing)	Sheryl Rennick			■ 1. Tł	nere is no pres	umption	of abuse	
	ankruptcy Court for the: District of Rhode Is	land		а	pplies will be n	nade un	der <i>Chapter 7 l</i>	nption of abuse Means Test
Case number _ (if known)				□ 3. Tł		does no	m 122A-2). ot apply now be e but it could ap	
					eck if this is a			piy later.
Official Fo	orm 122A - 1			LI CITE	ck ii tilis is a	ii aiiici	ided illing	
	Statement of Your Cur	rent Moi	nthly Inc	ome	2			12/1
attach a separate s case number (if kn qualifying military	d accurate as possible. If two married people a sheet to this form. Include the line number to w lown). If you believe that you are exempted from service, complete and file Statement of Exempte culate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies. se you o	On the top of aid on the top of aid on the top of the t	ny additi narily co	onal pages, writ ensumer debts o	e your name and r because of
1. What is yo	ur marital and filing status? Check one on	у.						
☐ Not mar	rried. Fill out Column A, lines 2-11.							
■ Married	and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.				
☐ Married	and your spouse is NOT filing with you.	ou and your s	spouse are:					
☐ Living	g in the same household and are not legal	ly separated.	Fill out both Co	lumns A	A and B, lines 2	2-11.		
pena	g separately or are legally separated. Fill of lty of perjury that you and your spouse are le apart for reasons that do not include evadin	gally separated	d under nonban	kruptcy	law that applie	es or tha		
101(10A). For e the 6 months, a	age monthly income that you received from all s xample, if you are filing on September 15, the 6-modd the income for all 6 months and divide the total lessame rental property, put the income from that pr	onth period would by 6. Fill in the re	be March 1 throi sult. Do not includ	ugh Augu de any in	ust 31. If the amo	ount of your	our monthly incom once. For examp	ne varied during le, if both
				Colum Debto			nn B or 2 or iling spouse	
Your gross payroll ded	s wages, salary, tips, bonuses, overtime, a	and commission	ons (before all	\$	4,089.00	\$	1,265.67	
3. Alimony ar Column B is	nd maintenance payments. Do not include s filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you or y from an unr and roomm	ts from any source which are regularly pa your dependents, including child support. married partner, members of your household ates. Include regular contributions from a spi not include payments you listed on line 3.	Include regular , your depende	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net income	e from operating a business, profession, o							
			otor 1					
	ipts (before all deductions)	\$ 0.00 -\$ 0.00						
•	nd necessary operating expenses y income from a business, profession, or farm		Copy here ->	\$	0.00	\$	0.00	
•	e from rental and other real property		оору	* —		*		
o. Net meetine	on and other real property	Deb	otor 1					
Gross recei	ipts (before all deductions)	\$ 0.00						
	nd necessary operating expenses	-\$ 0.00						
Net monthly	y income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	
7. Interest, di	vidends, and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

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tor 2		s Rennick, Jr.								
.51 2	Shery	/I Rennick				Case numb	oer (if known)			
						Column A Debtor 1			nn B or 2 or iling spou	se
Une	employn	ment compensation				\$	0.00	\$	0.0	00
		r the amount if you contend Security Act. Instead, list it h		received was a be	enefit und	der				
F	or you		\$		0.00					
		spouse			0.00					
ben	efit unde	retirement income. Do no er the Social Security Act.	•			\$	0.00	\$	0.0	00
Do rece	not inclu eived as	m all other sources not lis ide any benefits received ur a victim of a war crime, a c rrorism. If necessary, list oth	nder the Social S rime against hun	Security Act or paying the paying the control of th	ments onal or					
	· ter	mporary disability insu	rance			\$	0.00	\$	1,653.	00_
						\$	0.00	\$	0.0	00_
	To	tal amounts from separate p	pages, if any.			+ \$	0.00	\$	0.0	00
		our total current monthly n. Then add the total for Co			or \$_	4,089.00	+ \$ _	2,918.	67 =	7,007.67
	_	your current monthly incor	-	•		Co	py line 11	here=>	\$	7,007.67
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12b		y by 12 (the number of mon sult is your annual income f	• ,						12b. \$	x 12
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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	7 :	Liquidation
\$2	245	filing fee
Ş	\$75	administrative fee
+ 9	\$15	trustee surcharge
\$:	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1:19-bk-10583 Doc 1 Filed 04/14/19 Entered 04/14/19 15:56:30 Desc Main Document Page 52 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Rhode Island

In re	James Rennick, Jr. Sheryl Rennick		Case No.		
mic	Sheryr Rennick	Debtor(s)	Chapter	7	_
	DISCLOSURE OF COMP	ENSATION OF ATTOR	NEV FOR DE	'RTOD(S)	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fee rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	1,400.00	
	Prior to the filing of this statement I have received	ed	\$	1,400.00	
	Balance Due		\$	0.00	
2. Т	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed co	mpensation with any other person	unless they are mem	pers and associates of my law firm	1.
I	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the				
5. 1	n return for the above-disclosed fee, I have agreed to	o render legal service for all aspects	s of the bankruptcy c	ase, including:	
b c	 Analysis of the debtor's financial situation, and references. Preparation and filing of any petition, schedules, see Representation of the debtor at the meeting of creed. [Other provisions as needed] Exemption planning; preparation and 	statement of affairs and plan which ditors and confirmation hearing, an	may be required; d any adjourned hea	rings thereof;	
6. E	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any proceeding.	fee does not include the following dischargeability actions, relie	service: f from stay action	s or any other adversary	
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
_	oril 11, 2019 ate	Isl John S. Simon John S. Simonian Signature of Attorne John S. Simonian 40 Montgomery S Pawtucket, RI 028 941-4800 Fax: 78 john@law-ri.com	y bit No 2 862		

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United States Bankruptcy Court District of Rhode Island

In re	James Rennick, Jr. Sheryl Rennick		Case No.	
	•	Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

American Profit Recovery 33 Boston Post Rd W No 140 Marlborough MA 01752

American Profit Recovery 34505 W 12 Mile Rd Ste 333 Farmington MI 48331-5608

Cabela s Club Capital One PO Box 30285 Salt Lake City UT 84130

Capital One PO Box 30285 Salt Lake City UT 84130-0253

Citi PO Box 6500 Sioux Falls SD 57117

Comenity Bank
Bankruptcy Department
PO Box 182125
Columbus OH 43218-2125

Discover Bank PO Box 30421 Salt Lake City UT 84130-0421

Elmwood Orthopedic Rehab 193 Elmwood Ave Providence RI 02907

Embrace Home Loans PO Box 19409 Charlotte NC 28219

Lending Club Corporation 71 Stevenson Suite 300 San Francisco CA 94105

Navigant Credit Union 693 Broad Street Central Falls RI 02863-2339 Pawtucket Municipal Employees Federal Credit Union 137 Roosevelt Avenue Pawtucket RI 02860

Radius Global Solutions LLC PO Box 390905 Minneapolis MN 55439

Sears Credit Cards PO Box 6282 Sioux Falls SD 57117-6282

Sun Run 595 Market St 29th Floor San Francisco CA 94105

Sun Run PO Box 511612 Los Angeles CA 90051-8167

SYNCB Paypal Smart Connect PO Box 965060 Orlando FL 32896-5061

SYNCB Walmart PO Box 965060 Orlando FL 32896

TD Bank PO Box 84037 Columbus GA 31908-4037

Wells Fargo EFS PO Box 84712 Sioux Falls SD 57118-4712